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PTO/SB/83 (08-00)

Approved for use through 10/31/2002. OMB 0651-0035

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## REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Application Number	09 1475, 946
Filing Date	(Not Available)
First Named Inventor	Potega, Patrick H.
Group Art Unit	(NOT Available)
Examiner Name	(NOT Available)
Attorney Docket Number	1092-107.051

To:	Assistant Commissioner for Patents
	Washington, DC 20231

I hereby apply to withdraw as attorney or agent for the above identified patent application.

The reasons for this request are:

Client, Mr. Patrick H. Potega, has outstanding charges, the major portion of which is over fifteen months past due. Client has informed me that there is no expectation of payment in the foreseeable future.

Client apparently wishes to conduct the prosecution of his pending cases himself, since he has informed at least one USPTO Examiner that I no longer represent him. Moreover, the primary Patent Attorney, Mr. Colin P. Abrahams, with whom I am associated in handling Client's new and pending patent applications, is also filing a Request For Withdrawal as Attorney or Agent.

I have made several phone calls to work out an amicable arrangement to continue our business relationship, without success.

1.	$\mathbf{x}$	The correspondence address	is NOT	affected	by 1	this	withdrawal.
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2.	Ш	Change the correspond	ience address and	direct all	l future	correspondence	to:
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÷	CORRESPON	IDENCE ADDRESS	ſ		
Customer Numb	er			Custome	er Number el here
OR					
Firm or Individual Name	Don A. Holline	gsworth		,	
Address	22339 Circle	J Ranch Rd			
Address					
City	Santa Clarita	State	CA	ZIP	91350
Country	US				
Telephone	661 253-3747	Fax	661 253	-3787	
This request is enclosed	d in triplicate.	·			
Name	Don A. Hollingswor	rth/ (Rea#	25,63	<u>1)</u>	
Signature	D. C. Halle Dur				
Date	June 9, 2001 ()				
NOTE: Withdrawal is ef	fective when approved rather than v	when received.			

period for response or possible extension period, the request to withdraw is normally disapproved.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Unless there are at least 30 days between approval of withdrawal and the expiration date of a time